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Post-Operative Physical Therapy Protocol for Ulnar Collateral Ligament Reconstruction

Precautions: Avoid any valgus stress to the elbow until actual pitching begins.

Days 0-7:

Keep post-operative splint clean and dry.

Precautions:

No valgus stress to the elbow.

Therapeutic Exercises:

Wrist circles

Ball/putty squeeze

Full active wrist radial and ulnar deviation range of motion.

Gentle stretching of wrist and fingers.

Active and active assisted wrist flexion and extension range of motion exercises.

Gentle passive range of motion exercises for the shoulder.

Weeks 1-4:

Discontinue splint one week after surgery.

A sling may be worn for one additional week after the splint is removed if necessary.

Precautions:

No valgus stress to the elbow.

Range of Motion:

Beginning at Week 2: Passive elbow ROM: 30-100°

Beginning at Week 3: Passive elbow ROM: 20-110°

Beginning at Week 4: Passive elbow ROM: 10-120°

Active wrist flexion and extension

Active wrist pronation and supination with elbow supported

Active wrist radial and ulnar deviation with elbow supported

Active digital flexion and extension

Therapeutic Exercises:

Begin a lower extremity conditioning and core stabilization program 2 weeks after surgery.

Gradually achieve full elbow flexion and extension range of motion utilizing joint mobilization as necessary.

Continue range of motion for forearm, wrist, and shoulder as needed.

Add closed chain ball circles on the wall.

Shoulder shrugs.

Cuff weight about elbow: Flexion, Abduction, Extension.

Weeks 4-6:

Patient should have full range of motion at the elbow, wrist, forearm, and shoulder.

Precautions:

No valgus stress to the elbow.

Range of Motion:

Beginning at Week 5: Progress to full passive elbow flexion and extension

Therapeutic Exercises:

Progress closed chain exercises

-Add manual resistance to the ball exercise weightbearing through the upper extremity.

Scapular protraction and retraction.

Sidelying cuff ER exercises.

Add weights to wrist ROM exercises.

Weeks 6-8:

Patient should have full range of motion at the elbow, wrist, forearm, and shoulder.

Precautions:

No valgus stress to the elbow.

Therapeutic Exercises:

Biceps and triceps pulleys.

ER pulleys.

DB flexion, scaption, biceps.
PB horizontal abduction/triceps extension.
Wall push-ups with protraction.
Scap 6.
Physioball Cobras.
Physioball Rows.

Weeks 8-12:

Precautions:

No valgus stress to the elbow.

Therapeutic Exercises:

ER at 85° abduction
PB ER with Press/ss Cobra.
PB Press with Protraction/SS Rows

Weeks 12-16:

Precautions:

No valgus stress to the elbow.

Therapeutic Exercises:

Rice bucket.
PB push-up + on floor.
IR at neutral and 85° abduction (IR weight = ER weight)

Weeks 16-20:

Precautions:

No valgus stress to the elbow.

Therapeutic Exercises:

Free motion Push/Pull
Begin Plyometric exercises:
2 Hand Chest Pass
Shoulder Plyos
Elbow Plyo Trainer

Week 20:

Therapeutic Exercises:

Begin throwing program and/or agilities specific to their sport when athlete has full, pain-free elbow range of motion without swelling.